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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FULL Friends of Bill Posey]		
ADDRESS (number and street) P. O. Box 411486			-		
CITY, STATE, and ZIP CODE			-		
Melbourne	FL 329				
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)		4. FEC IDENTIFICATION NUMBER		
Bill Posey	House	House FL 08 C		C00444968	
5. IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE	NOTICE FILED ON	/	/	
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount	
Barry Segal	Focus Autism		day, year)		
			08/19/2014	1600.00	
776 Mountain Blvd., #202		4404			
	Transaction ID : F6.4191 Occupation		-		
Watchung NJ 07069	NJ 07069 president				
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount	
Dolly Segal	n/a		day, year)		
			08/19/2014	2600.00	
776 Mountain Blvd., #202					
	Transaction ID : F6.4192				
Watchung NJ 07069	Occupation retired				
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount	
	, ,		day, year)		
	Occupation				
			_		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month, day, year)	Amount	
	Occupation		_		
	Cocapation				
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount	
			day, year)		
	Occupation				
SIGNATURE (optional)		DATE	For further i	nformation contact:	
Nancy H. Watkins	[Electronically Filed]		Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100		

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